



A07-0023 1/24/03

*Application Form*

EMCO Enterprises, Inc.

Name of facility\*

Andersen Corporation

Name of parent company (if any)

2121 East Walnut

Street address

Street address (continued)

Des Moines, IA 50317

City/State/Zip code

Give us information about your contact person for the National Environmental Performance Track Program.

Name Mr./Mrs./Ms./Dr. Mike Steen

Title Facilities Manager

Phone (515) 264-4202

Fax (515) 264-4210

E-mail msteen@forever.com

Facility/Company Website www.emcodoors.com

\* If you are applying for multiple facilities, you must call 1-888-339-PTRK(7875)

***Why do we need this information?***

EPA needs background information on your facility to evaluate your application.

***What do you need to do?***

- ♦ Provide background information on your facility.
- ♦ Identify your environmental requirements.

# Section A

*Tell us about your facility.*

**1** What do you do or make at your facility?

EMCO Enterprise Inc. manufactures a wide variety of styles of high quality easy to install storm doors and accessories.

**2** List the North American Industrial Classification System (NAICS) codes that you use to classify business at your facility.

NAICS  
332313      \_\_\_\_\_

**3** Does your company meet the Small Business Administration definition of a small business for your sector?

☐ Yes      ☒ No

**4** How many employees (full-time equivalents) currently work at your facility? If you checked "Yes" in question 3 and have fewer than 50 employees at your facility, then you are considered a "small facility" by the Performance Track Program.

- ☐ Fewer than 50  
☐ 50-99  
☒ 100-499  
☐ 500-1,000  
☐ More than 1,000

**5** Complete the Environmental Requirements Checklist on pages 32-38 of the instructions and enclose it with your application.

## *Section A, continued*

- 6 Optional: Is there anything else you would like to tell us about your facility? Do you participate in other voluntary programs at the local, tribal, State, or Federal level?

### Why do we need this information?

Facilities need to have an operating Environmental Management System (EMS) that meets certain requirements.

### What do you need to do?

- ♦ Confirm that your EMS meets the Performance Track requirements.
- ♦ Tell us if you have completed a self-assessment or have had a third-party assessment of your EMS.

# Section B

*Tell us about your EMS.*

Read the EMS requirements on page 9-12 of instructions.  
Tell us if your EMS meets these requirements for:

- 1 Environmental policy \_\_\_\_\_ ☒ Yes ☐ No
- 2 Planning \_\_\_\_\_ ☒ Yes ☐ No
- 3 Implementing and operation \_\_\_\_\_ ☒ Yes ☐ No
- 4 Checking and corrective action \_\_\_\_\_ ☒ Yes ☐ No
- 5 Management review \_\_\_\_\_ ☒ Yes ☐ No
- 6 Have you done a comprehensive review of all activities conducted at your facility that could impact the environment? (i.e., have you done an aspect analysis?) ☒ Yes ☐ No
- 7 Have you classified your aspects based on their potential harm to the environment, on community concerns, and/or on other objective factors? (i.e., have you determined your significant aspects?) ☒ Yes ☐ No
- 8 When did you last update your aspect analysis? (mo/yr) 12/01
- 9 Have you completed at least one EMS cycle (plan-do-check-act)? ☒ Yes ☐ No
- 10 Did this cycle include both an EMS and a compliance audit? ☒ Yes ☐ No
- 11 Have you completed an objective self-assessment or third-party assessment of your EMS? ☒ Yes ☐ No

If yes, what method of EMS assessment did you use?

Self-assessment

Third-party assessment

☐ GEMI

☐ ISO 14001 Certification

☐ CEMP

☒ Other Environmental Attorneys and parent company environmental staff.

☒ Other ISO 14001

### ***Why do we need this information?***

Facilities need to show that they are committed to improving their environmental performance. This means that you can describe past achievements and will make future commitments.

### ***What do you need to do?***

Refer to the Environmental Performance Table in the instructions to answer questions 1 and 2.

# *Section C*

*Tell us about your past achievements and future commitments.*

**Part 1** You must report past achievements for at least two environmental aspects, and you must choose these aspects from the Environmental Performance Table on pages 29-31 of the instructions. Please quantify each of your aspects using the units listed for that aspect in the Environmental PTrack Information Hotline at 1-888-339-PTRK.

**Note to small facilities:** If you are a small facility, you must report past achievements for only one environmental aspect.

### ***First achievement***

<b>1</b> What aspect have you selected from the Table on page 29-31?	Emissions of Particulate Matter	
<b>2</b> What units are you using to quantify this aspect? (See Table, page 29-31.)	Tons	
	PAST	CURRENT
<b>3</b> List the past annual quantity of the aspect (from two years ago) and the current annual quantity of the aspect (from the most recent year for which you have data).	1.64	1.22
<b>4</b> What are the years for which you are reporting these quantities?	1999	2001
<b>5</b> Estimate your past normalizing factor (Page 18 of the Instructions will help you calculate this.)	0.8	1.0
<b>6</b> What is your normalizing factor based on (e.g., production, employment)?	Production	
<b>7</b> You reported an improvement in the quantity of the aspect in Question 3. How did you achieve this improvement?	We have reduced particulate emissions by 26 percent by better mechanical filtration and maintenance activities.	

## Section C, continued

### Second achievement

1 What aspect have you selected from the Table on page 29-31?	Solid Waste	
2 What units are you using to quantify this aspect? (See Table, page 29-31.)	Tons	
	PAST	CURRENT
3 List the past annual quantity of the aspect (from two years ago) and the current annual quantity of the aspect (from the most recent year for which you have data).	52	32
4 What are the years for which you are reporting these quantities?	1999	2001
5 Estimate your past normalizing factor (Page 18 of the Instructions will help you calculate this.)	0.8	1.0
6 What is your normalizing factor based on (e.g., production, employment)?	Production	
7 You reported an improvement in the quantity of the aspect in Question 3. How did you achieve this improvement?	Eliminated back-draft water wash from spray paint booths and converted to mechanical filters eliminating the paint sludge collected from the water wash sumps.	

**Part 2** You must make future commitments for at least four environmental aspects, and you must choose these aspects from the Environmental Performance Table on pages 29-31 of the Instructions. The aspects you select for your future commitments should be related to the objectives and targets in your EMS. Where possible, they also should be identified as having a significant environmental impact in your EMS. No more than two of your aspects can be from the same environmental category. If you're not sure how your objectives and targets fit into our aspects or whether your aspects are significant, call the PTrack Information Hotline at 1-888-339-PTRK.

Once you have chosen your four environmental aspects, then fill in all the necessary information for these aspects in the tables on pages 7-10 of this form. Please quantify each of your aspects using the units listed for that aspect in the Environmental Performance Table. Each table that you must fill in corresponds to one of the environmental aspects you have chosen.

We will assume that your performance commitments are based on a constant production or employment level. If you would like to base your commitment on changing production or employment, please fill out optional questions 6a and 6b.

**Note to small facilities:** If you are a small facility, you must report future commitments for only two environmental aspects.

## Section C, continued

### First commitment

<b>1</b> What aspect have you selected from the Table on pages 29-31?	Emissions of VOCs	
<b>2</b> What units are you using to quantify this aspect?	Tons	
<b>3a</b> Is this aspect considered significant in your EMS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>3b</b> If no, please explain why you believe this aspect should be included as a performance commitment.		
	CURRENT	FUTURE
<b>4</b> List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	66.1	<10
<b>5</b> What are the years for which you are reporting these quantities?	2001	2004
<b>6a</b> (Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	1.3
<b>6b</b> (Optional) What is your normalizing factor based on (e.g., production, employment)?	Production	
<b>7</b> You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Convert from painting door slabs to pre-pigmented door slabs reducing VOC emissions by approximately 85 percent.	
<b>8a</b> Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>8b</b> If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.	Our air permit limits the facility to 249 tons per year of VOC emissions, we have made progress on reducing the emissions but this change will allow us to almost completely eliminate the painting of product and this process accounts for most of the VOC emissions from the facility.	

## Section C, continued

### Second commitment

<b>1</b> What aspect have you selected from the Table on pages 29-31?	Total Energy Use	
<b>2</b> What units are you using to quantify this aspect?	mmBTU	
<b>3a</b> Is this aspect considered significant in your EMS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>3b</b> If no, please explain why you believe this aspect should be included as a performance commitment.		
	CURRENT	FUTURE
<b>4</b> List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	10.5	7.9
<b>5</b> What are the years for which you are reporting these quantities?	2001	2004
<b>6a</b> (Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	
<b>6b</b> (Optional) What is your normalizing factor based on (e.g., production, employment)?		
<b>7</b> You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	We are planning on replacing old single pane aluminum windows in the manufacturing area with high performance low e glass, Energy Star labeled Andersen windows, this will decrease our natural gas used to heat the facility.	
<b>8a</b> Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>8b</b> If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.	N/A.	



## Section C, continued

### Third commitment

<b>1</b> What aspect have you selected from the Table on pages 29-31?	Hazardous Materials Use	
<b>2</b> What units are you using to quantify this aspect?	Tons	
<b>3a</b> Is this aspect considered significant in your EMS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>3b</b> If no, please explain why you believe this aspect should be included as a performance commitment.		
	CURRENT	FUTURE
<b>4</b> List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	195	<33
<b>5</b> What are the years for which you are reporting these quantities?	2001	2004
<b>6a</b> (Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	1.3
<b>6b</b> (Optional) What is your normalizing factor based on (e.g., production, employment)?	Production	
<b>7</b> You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Convert from painting door slabs to pre-pigmented door slabs reducing hazardous material usage by approximately 84 percent.	
<b>8a</b> Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>8b</b> If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.	SARA 313 reporting of levels of certain chemicals in the coatings. By making this change we will likely reduce usage below reporting thresholds.	

## Section C, continued

### Fourth commitment

<b>1</b> What aspect have you selected from the Table on pages 29-31?	Emissions of ozone depleting gases	
<b>2</b> What units are you using to quantify this aspect?	Pounds	
<b>3a</b> Is this aspect considered significant in your EMS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>3b</b> If no, please explain why you believe this aspect should be included as a performance commitment.		
	CURRENT	FUTURE
<b>4</b> List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	1538	0
<b>5</b> What are the years for which you are reporting these quantities?	2001	2004
<b>6a</b> (Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	1.3
<b>6b</b> (Optional) What is your normalizing factor based on (e.g., production, employment)?	Production	
<b>7</b> You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Eliminate ozone depleting chemicals used as a blowing agent in a door foam insulation process.	
<b>8a</b> Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>8b</b> If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.	SARA 313 chemicals in the blowing agent will be eliminated reducing the number of 313 chemicals we report.	

***Why do we need this information?***

Facilities need to demonstrate their commitment to public outreach and performance reporting. You should have appropriate mechanisms in place to identify community concerns, to communicate with the public, and to provide information on your environmental performance.

***What do you need to do?***

- ♦ Describe your approach to public outreach.
- ♦ List three references who are familiar with your facility.

# Section D

*Tell us about your public outreach and reporting.*

- |   |  |
|---|--|
| <b>1</b> How do you identify and respond to community concerns?                                     | Meet quarterly with Citizens for Community Improvement of Des Moines (CCI)<br><br>Published Phone numbers for concerns<br><br>Inquiry tracking system  |
| <b>2</b> How do you inform community members of important matters that affect them?                 | CCI meetings<br>Neighborhood Summer Picnic for employees and community.  |
| <b>3</b> How will you make the Performance Track Annual Performance Report available to the public? | <input checked="" type="checkbox"/> Website <a href="http://www.emcodoors.com">www.emcodoors.com</a><br><input type="checkbox"/> Newspaper<br><input checked="" type="checkbox"/> Open Houses<br><input checked="" type="checkbox"/> Other<br>CCI Meetings |

## Section D, continued

- 4 Are there any ongoing citizen suits against your facility? ☐ Yes ☒ No

If yes, describe briefly in the right-hand column.

- 5 List references below

	Organization	Name	Phone number
<i>Representative of a Community/ Citizen Group</i>			
<i>State/tribal/local regulator</i>	Polk County Air Quality	Jim McCasland	515-286-3351
<i>Other community/local reference (e.g., emergency management official or business associate)</i>			

# Section E

## Application and Participation Statement.

On behalf of EMCO Enterprises, Inc  
[my facility],

I certify that

I have read and agree to the terms and conditions for Application and Participation in the National Environmental Performance Track, as specified in the *National Environmental Performance Track Program Guide* and in the *Application Instructions*;

- I have personally examined and am familiar with the information contained in this Application, including the Environmental Requirements Checklist. The information contained in this Application is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete, and I have no reason to believe the facility would not meet all program requirements;
- My facility has an environmental management system (EMS), as defined in the Performance Track EMS requirements, including systems to maintain compliance with all applicable Federal, State, tribal, and local environmental requirements in place at the facility, and the EMS will be maintained for the duration of the facility's participation in the program;
- My facility has conducted an objective assessment of its compliance with all Federal, State, tribal, and local environmental requirements, and the facility has corrected all identified instances of potential or actual noncompliance;
- Based on the foregoing compliance assessment and subsequent corrective actions (if any were necessary), my facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with applicable Federal, State, tribal, and local environmental requirements.

I agree that EPA's decision whether to accept participants into or remove them from the National Environmental Performance Track is wholly discretionary, and I waive any right that may exist under any law to challenge EPA's acceptance or removal decision.

I am the senior facility manager and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is applying to this program.

Signature/Date	_____
Printed Name/Title	<u>Mr./Mrs./Ms./Dr. J Glasnapp/President</u>
Phone Number/E-mail	<u>(515) 265-6101</u>
Facility Name	<u>EMCO Enterprises, Inc</u>
Facility Street Address	<u>2121 East Walnut</u>
City/State/Zip Code	<u>Des Moines, IA 50317</u>

## National Environmental Achievement Track

### *Environmental Requirements Checklist*

The following Checklist is provided to assist facilities in answering Section A, "Tell us about your facility," Question 6. The Checklist is given to help facilities identify the major federal, state, tribal, and local environmental requirements applicable at their facilities. The Checklist is not intended to be an exhaustive list of all environmental requirements that may be applicable at an individual facility.

If you use this Checklist and choose to submit it with your application, fill in your facility information below and enclose the completed Checklist with your application (see instructions).

**Facility Name** EMCO Specialties  
**Facility Location:** 2121 E. Walnut, Des Moines, IA 50317  
**Facility ID Number(s):** 99-TV-029-M001 Operating Air Permit  
**(attach additional sheets if necessary)** IA-5128-4963 NPDES Permit  
IAD000222919

#### Air Pollution Regulations

Check All  
That Apply

1. National Emission Standards for Hazardous Air Pollutants (40 CFR 61) ☒
2. Permits and Registration of Air Pollution Sources ☒
3. General Emission Standards, Prohibitions and Restrictions ☒
4. Control of Incinerators ☐
5. Process Industry Emission Standards ☒
6. Control of Fuel Burning Equipment ☐
7. Control of VOCs ☒
8. Sampling, Testing and Reporting ☒
9. Visible Emissions Standards ☒
10. Control of Fugitive Dust ☒
11. Toxic Air Pollutants Control ☐
12. Vehicle Emissions Inspections and Testing ☐

**Other Federal, State, Tribal or Local Air Pollution Regulations Not Listed Above**  
(identify)

13. ☐
14. ☐

#### Hazardous Waste Management Regulations

1. Identification and Listing of Hazardous Waste (40 CFR 261)
  - Characteristic Waste ☒
  - Listed Waste ☒
2. Standards Applicable to Generators of Hazardous Waste (40 CFR 262)
  - Manifesting ☒
  - Pre-transport requirements ☒
  - Record keeping/reporting ☒

- |  |                          |
|--|--------------------------|
| 3. Standards Applicable to Transporters of Hazardous Waste (40 CFR 263)                                    |                          |
| - Transfer facility requirements   | <input type="checkbox"/> |
| - Manifest system and record-keeping   | <input type="checkbox"/> |
| - Hazardous waste discharges   | <input type="checkbox"/> |
| 4. Standards for Owners and Operators of TSD Facilities (40 CFR 264)                                       |                          |
| - General facility standards   | <input type="checkbox"/> |
| - Preparedness and prevention  | <input type="checkbox"/> |
| - Contingency plan and emergency procedures  | <input type="checkbox"/> |
| - Manifest system, Record keeping and reporting  | <input type="checkbox"/> |
| - Groundwater protection   | <input type="checkbox"/> |
| - Financial requirements   | <input type="checkbox"/> |
| - Use and management of containers   | <input type="checkbox"/> |
| - Tanks  | <input type="checkbox"/> |
| - Waste piles  | <input type="checkbox"/> |
| - Land treatment   | <input type="checkbox"/> |
| - Incinerators   | <input type="checkbox"/> |
| 5. Interim Status Standards for TSD Owners and Operators (40 CFR 265)                                      | <input type="checkbox"/> |
| 6. Interim Standards for Owners and Operators of New Hazardous Waste Land Disposal Facilities (40 CFR 267) | <input type="checkbox"/> |
| 7. Administered Permit Program (Part B) (40 CFR 270)   | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Hazardous Waste Management Regulations Not Listed Above (identify)**

- |    |                          |
|----|--------------------------|
| 8. | <input type="checkbox"/> |
| 9. | <input type="checkbox"/> |

**Hazardous Materials Management**

- |  |                                     |
|--|-------------------------------------|
| 1. Control of Pollution by Oil and Hazardous Substances (33 CFR 153)                               | <input type="checkbox"/>            |
| 2. Designation of Reportable Quantities and Notification of Hazardous Materials Spill (40 CFR 302) | <input type="checkbox"/>            |
| 3. Hazardous Materials Transportation Regulations (49 CFR 172-173)                                 | <input checked="" type="checkbox"/> |
| 4. Worker Right-to-Know Regulations (29 CFR 1910.1200)   | <input checked="" type="checkbox"/> |
| 5. Community Right-to-Know Regulations (40 CFR 350-372)  | <input checked="" type="checkbox"/> |

**Other Federal, State, Tribal or Local Hazardous Materials Management Regulations Not Listed Above (identify)**

- |    |                          |
|----|--------------------------|
| 6. | <input type="checkbox"/> |
| 7. | <input type="checkbox"/> |

**Solid Waste Management**

- |  |                                     |
|--|-------------------------------------|
| 1. Criteria for Classification of Solid Waste Disposal Facilities and Practices (40 CFR 257) | <input type="checkbox"/>            |
| 2. Permit Requirements for Solid Waste Disposal Facilities                                   | <input type="checkbox"/>            |
| 3. Installation of Systems of Refuse Disposal  | <input type="checkbox"/>            |
| 4. Solid Waste Storage and Removal Requirements  | <input type="checkbox"/>            |
| 5. Disposal Requirements for Special Wastes  | <input checked="" type="checkbox"/> |

**Other Federal, State, Tribal or Local Solid Waste Management Regulations Not Listed Above (identify)**

- |    |                          |
|----|--------------------------|
| 6. | <input type="checkbox"/> |
| 7. | <input type="checkbox"/> |

**Water Pollution Control Requirements**

- |   |                          |
|---|--------------------------|
| 1. Oil Spill Prevention Control and Countermeasures (SPCC) (40 CFR 112)                                 | <input type="checkbox"/> |
| 2. Designation of Hazardous Substances (40 CFR 116)   | <input type="checkbox"/> |
| 3. Determination of Reportable Quantities for Hazardous Substances (40 CFR 117)                         | <input type="checkbox"/> |
| 4. NPDES Permit Requirements (40 CFR 122)   | <input type="checkbox"/> |
| 5. Toxic Pollutant Effluent Standards (40 CFR 129)  | <input type="checkbox"/> |
| 6. General Pretreatment Regulations for Existing and New Sources (40 CFR 403)                           | <input type="checkbox"/> |
| 7. Organic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 414)          | <input type="checkbox"/> |
| 8. Inorganic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 415)        | <input type="checkbox"/> |
| 9. Plastics and Synthetics Point Source Effluent Guidelines and Standards (40 CFR 416)                  | <input type="checkbox"/> |
| 10. Water Quality Standards   | <input type="checkbox"/> |
| 11. Effluent Limitations for Direct Dischargers   | <input type="checkbox"/> |
| 12. Permit Monitoring/Reporting Requirements  | <input type="checkbox"/> |
| 13. Classifications and Certifications of Operators and Superintendents of Industrial Wastewater Plants | <input type="checkbox"/> |
| 14. Collection, Handling, Processing of Sewage Sludge   | <input type="checkbox"/> |
| 15. Oil Discharge Containment, Control and Cleanup  | <input type="checkbox"/> |
| 16. Standards Applicable to Indirect Discharges (Pretreatment)  | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Water Pollution Control Regulations Not Listed Above (identify)**

- |     |                          |
|-----|--------------------------|
| 17. | <input type="checkbox"/> |
| 18. | <input type="checkbox"/> |

**Drinking Water Regulations**

- |  |                          |
|--|--------------------------|
| 1. Underground Injection and Control Regulations, Criteria and Standards (40 CFR 144, 146) | <input type="checkbox"/> |
| 2. National Primary Drinking Water Standards (40 CFR 141)                                  | <input type="checkbox"/> |
| 3. Community Water Systems, Monitoring and Reporting Requirements (40 CFR 141)             | <input type="checkbox"/> |
| 4. Permit Requirements for Appropriation/Use of Water from Surface or Subsurface Sources   | <input type="checkbox"/> |
| 5. Underground Injection Control Requirements  | <input type="checkbox"/> |
| 6. Monitoring, Reporting and Record keeping Requirements for Community Water Systems       | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Drinking Water Regulations Not Listed Above(identify)**

- |    |                          |
|----|--------------------------|
| 7. | <input type="checkbox"/> |
| 8. | <input type="checkbox"/> |



**Toxic Substances**

- |  |                          |
|--|--------------------------|
| 1. Manufacture and Import of Chemicals, Record keeping and Reporting Requirements (40 CFR 704) | <input type="checkbox"/> |
| 2. Import and Export of Chemicals (40 CFR 707)   | <input type="checkbox"/> |
| 3. Chemical Substances Inventory Reporting Requirements (40 CFR 710)                           | <input type="checkbox"/> |
| 4. Chemical Information Rules (40 CFR 712)   | <input type="checkbox"/> |
| 5. Health and Safety Data Reporting (40 CFR 716)   | <input type="checkbox"/> |
| 6. Pre-Manufacture Notifications (40 CFR 720)  | <input type="checkbox"/> |
| 7. PCB Distribution Use, Storage and Disposal (40 CFR 761)                                     | <input type="checkbox"/> |
| 8. Regulations on Use of Fully Halogenated Chlorofluoroalkanes (40 CFR 762)                    | <input type="checkbox"/> |
| 9. Storage and Disposal of Waste Material Containing TCDD (40 CFR 775)                         | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Toxic Substances Regulations Not Listed Above (identify)**

- |     |                          |
|-----|--------------------------|
| 10. | <input type="checkbox"/> |
| 11. | <input type="checkbox"/> |

**Pesticide Regulations**

- |  |                          |
|--|--------------------------|
| 1. FIFRA Pesticide Use Classification (40 CFR 162)                               | <input type="checkbox"/> |
| 2. Procedures for Disposal and Storage of Pesticides and Containers (40 CFR 165) | <input type="checkbox"/> |
| 3. Certification of Pesticide Applications (40 CFR 171)                          | <input type="checkbox"/> |
| 4. Pesticide Licensing Requirements  | <input type="checkbox"/> |
| 5. Labeling of Pesticides  | <input type="checkbox"/> |
| 6. Pesticide Sales, Permits, Records, Application and Disposal Requirements      | <input type="checkbox"/> |
| 7. Disposal of Pesticide Containers  | <input type="checkbox"/> |
| 8. Restricted Use and Prohibited Pesticides                                      | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Pesticides Regulations Not Listed Above (identify)**

- |     |                          |
|-----|--------------------------|
| 9.  | <input type="checkbox"/> |
| 10. | <input type="checkbox"/> |

**Environmental Clean-Up, Restoration, Corrective Action**

- |  |                          |
|--|--------------------------|
| 1. Comprehensive Environmental Response, Compensation and Liability Act (Superfund) (identify) | <input type="checkbox"/> |
|  | <input type="checkbox"/> |
| 2. RCRA Corrective Action (identify)   | <input type="checkbox"/> |
|  | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Environmental Clean-Up, Restoration, Corrective Action Regulations Not Listed Above (identify)**

- |    |                          |
|----|--------------------------|
| 3. | <input type="checkbox"/> |
| 4. | <input type="checkbox"/> |

The National Environmental Performance Track is a U.S. Environmental Protection Agency program. Please direct inquiries to 1-888-339-PTRK (7875) or e-mail [ptrack@indecon.com](mailto:ptrack@indecon.com).

To submit your application:

- 1) E-mail the completed application to [ptrack@indecon.com](mailto:ptrack@indecon.com),  
**and**
- 2) Fax the completed and signed Section E (**not** the entire application) to  
(617) 354-0463.

If you cannot e-mail the application, mail a hard copy of the entire completed application to:

The Performance Track Information Center  
c/o Industrial Economics Incorporated  
2067 Massachusetts Avenue  
Cambridge, MA 02140

## Paperwork Reduction Act Notice

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